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D STATES PATENT AND TRADEMARK OFFICE

Group Art Unit: 1616

Examiner: G. HOLLINDEN

AMENDMENT UNDER 37 1.116

2001 Ferry Building San Francisco, CA 94111 (415) 433-4150

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box, Assistant Commissioner for Patents, Washington, DC 20231, on January 13, 2000.

Norma E. Gillespie

LIMBACH & LIMBACH LLP Date: 01(13/00

In re Patent Application of

STEVEN C. QUAY

Application No. 08/896,821

Filed: July 18, 1997

METHOD OF ULTRASOUND IMAGING For:

Assistant Commissioner for Patents Washington, DC 20231

Sir:

Box AF

In response to the office Action dated July 21, 1999, please amend this Application as follow;

In the claims

Add the following new claims 36 and 37:

36: A method according to Claim 30 wherein the agent further comprises (a) an aqueous solution of human protein, (b) an aqueous suspension of liposomes, (c) an aqueous suspension of microspheres or (d) a suspension of crystals in a saccharide diluent.

37. In a method comprising ultrasound imaging, the improvement comprising enhancing the contrast in an ultrasound image by selecting for use as an enhancing agent microbubbles of a gas including perfluoropropane, perfluorobutane and perfluoropentane and further comprising (a) an aqueous



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Attorney Docket No. SNUS-125

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For:

METHOD OF ULTRASOUND IMAGING

Assistant Commissioner for Patents

Washington, D.C. 20231

Sir

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

(Col. 1)

(Col. 2)

(Col. 3)

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	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL	* 23	MINUS	** 21	= 2	× 18 =	\$ 36.00
INDEP.	* 5	MINUS	***4	= 1	× 78 =	\$ 78.00
FIRST PRESENTATION OF MULTIPLE DEP CLAIM					+260 =	\$

TOTAL

\$ 114.00

Small Entity 50% Filing Fee Reduction (if applicable)

\$ 57.00

- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- "** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

 The "Highest Number Previously Paid For" (Total or Independent is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.)
- 1. ___ No additional fee is required.
- 2. X A check in the amount of \$57.00 is attached.
- 3. _x Please charge any additional fees, including any fees necessary for extensions of time, or credit overpayment to Deposit Account No. 12-1420.

 A duplicate copy of this sheet is enclosed.
- 4. <u>x</u> Petition for extension of time. The undersigned attorney of record hereby petitions for an extension of time pursuant to 37 C.F.R. § 1.136(a), as may be required, to file this response.

Dated: 1/13 / 200

By:

Joel G. Ackerman

LIMBACH & LIMBACH L.L.P.

Registration No. 24,307 Attorneys for Applicant(s)

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Dated: January 13 2000

Norma F. Gillesnie

Rev. 11/17/98